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DATE: (

6/21/06

TO:

USPTO

ATTN:

AMENDMENT

RE:

Serial No. 10/688,145

FAX:

571-273-8300

FROM:

(Signature)

George C. Pappas

Number of Pages Sent:

(including this transmittal cover sheet)

ATTACHED HERETO PLEASE FIND AN AMENDMENT IN 11 PAGES; TRANSMITTAL FORM (1) PAGE;

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l hereby certify that this correspondence is being sent VIA FACSIMILE to (571) 273-8300. Attention Office of Amendments, on:	the Commissioner of Patents at fax number
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(Date of Deposit)	
Daria D. Kasmedo	
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PTO/\$B/21

T-698 P.002

F-911

U.S. Department of Commerce Parent and Trademark Office PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Customer No.: 23696 Attorney Docket No.: 030349 In Re Application of: Li Serial Number: 10/688,145

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Filed: 10/17/03 Examiner: Ahn Group Art Unit: 2637 JUN 2 1 2006

Dear Sir:

Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$120. The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. Date: 6/21/06 Signature: George C. Pappas, Reg. No. 35,065 858-651-1306 AUALCOMM Incorporated Aum: Patent Department 775 Morehouse Drive an Diego, California 92121-1714 Gelephone: (858) 658-5787	CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid Por	(c) Extra Claims	Large Entity Fee	Fee Paid
Multiple Dependent Claim(s):	Total*	26	26	0	x \$50 =	\$0
EXTENSION FEES Two Month \$120 \$120	Independent**	7	7	0	x \$200 =	\$0
EXTENSION FEES Two Months Three Months TERMINAL DISCLAIMER TOTAL FEE TOTAL FEE TOTAL FEE TOTAL FEE The check in the amount of \$ is enclosed to pay for any claim and/or extension fees. Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$120. The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. Date: 6/21/06 Signature: George C. Pappas, Reg. No. 35,065 RUALCOMM Incorporated Atm: Patent Department TOTAL FEE \$120 TOTAL FEE \$120	Multiple Depend	lent Claim(s):	Yes 🗌 No		\$360	\$
TERMINAL DISCLAIMER *If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 20, enter 0 in column c. **ITOTAL FEE \$120 **IOTAL FEE \$120			🔯 On	e Month	\$120	\$120
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Fee check in the amount of \$ is enclosed to pay for any claim and/or extension fees. Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$120. The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. Pate: 6/21/06 Signature: George C. Pappas, Reg. No. 35,065 AUALCOMM Incorporated tim: Patent Department To Morehouse Drive an Diego, California 92121-1714 elephone: (858) 658-5787					TOTAL FEE	\$120
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MAILING FACSIMILE	any overpays The Commit to 37 CFR to 37 CFR date: 6/21/06 QUALCOMM Inc. tm: Patent Depa 775 Morehouse f an Diego, Califor elephone: acsimile:	ment to said Deposissioner is further he 1.25(b), any fee who 1.18 inclusive, for the corporated artment Drive mla 92121-1714 (858) 658-5787 (858) 658-2502 CERTIFICA at this corresponden	t Account No. 17-0 reby authorized to coatsoever which may he entire pendency of	026. A duplicate charge to said Debecome properlof this application Signature:	e of this sheet is enclosed to eposit Account No. 17-002 by due or payable, as set from without specific addition. George C. Pappas, Reg. No. 858-651-1306 /BY KENY REG. ION (37 CFR 1.8(a))	for fee processing. 26, pursuant orth in 37 CFR 1.16 nal authorization. 0. 35,065
MAILING Geposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Depositor's Name: (type or print name) (type or print name) FACSIMILE Iteransmitted by facsimile to the Patent and Trademark Office. Depositor's Name: (type or print name)	any overpays. The Committo 37 CFR to 47 CFR t	ment to said Deposissioner is further he 1.25(b), any fee who 1.18 inclusive, for the 1.18 inclusive,	t Account No. 17-0 reby authorized to coatsoever which may he entire pendency of the open control of the control ce is, on the date sh Postal Service ss mail, in an imissioner for a, VA 22313-	026. A duplicate charge to said Debecome properly this application Signature: STRANSMISS own below, being transmit Trademo	e of this sheet is enclosed to eposit Account No. 17-002 by due or payable, as set from without specific addition of the property of the prope	for fee processing. 26, pursuant orth in 37 CFR 1.16 nal authorization. 0. 35,065 ON JENCKES NO. 41,873

From-8588456880

Appl. No. 10/688,145 Amdt. dated 6/21/06

Reply to Office Action of 2/22/06

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PATENT Docket: 030349

JUN 2 1 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of For: DATA DEMODULATION FOR A CDMA COMMUNICATION Tao Li **SYSTEM** Serial No. 10/688,145 Examiner: Sam Ahn Filed: 10/17/2003 Group No. 2637

AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated February 22, 2006, please amend the aboveidentified application as follows. Applicant through his attorney respectfully requests that the three-month statutory period for response due May 22, 2006, be extended one (1) month to June 22, 2006. Please charge Deposit Account No. 17-0026 the amount of \$120,00 to pay the necessary fee due.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-	I transmitted by facsimile to the Patent and Trademark Office.
1450.	Depositor's Name: Darla Kasmedo
Depositor's Name: (type or print name)	(type or print tame) Signature:
Date: 6/21/06	

PAGE 3/13 * RCVD AT 6/21/2006 7:28:55 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-5/17 * DNIS:2738300 * CSID; + * DURATION (mm-ss):03-24

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